MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/595535

FILING DATE

(FOR USE WITH FORM PTO-875)

	4	T)	CAR	
CL	Λ	LL.	V12	

	AS F	ILED		TER NOMENT		TER NOMENT			AS FILED		AFTER CAMENDMENT		AFTER	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.		HOMENT
								51				DET.	IND.	DEP.
$\frac{2}{3}$							<u> </u>	52						
4							-	53			Į"			
5								54			4.			
6						ļ		55 56						·
7							-	57	<u>-</u>					
8								58						<u>'</u> · .
9					·	<u> </u>	·]_	59						
11	-					<u> </u>	·	60				-		
12							-	61 62		· · · ·				
13		•			(,, , , , , , , , , , , , , , , , , , ,		-	63						
14				-			-	64 -			,			
15 16								65			300		-	
17		-					-	66						
18	· ·						·	67 68						
19			-		,		_	69						
20								.70			-			
21 22							ļ	71						
23				· .				72 73						25
24							-	74						
25	-	-						75						
26 27		<u>·</u>						76						
28								77 78						, F
29			·	;.4		·	-	79						
30								80						
31 32							-	81						
33							-	82 83						
34							-	84						
35.	·						· 1	85					<u> </u>	
36								86						
37 38				<u></u>				87					•	
39						 	-	88 89						
40							-	90						
41						<u> </u>		91						
42 43	·							92						
44						 	-	93 94						
45							-	95						
. 46					·		- -	96						
47						1		97		1				
48 49	·					<u> </u>		98						
50				ļ	<u> </u>			99		·:				
TOTAL IND.		1		-		1		100		1	<u> </u>			1
TOTAL DEP.		,		4		1 🛧	-	TALIKO.		*		4		*
TOTAL		QUI	6	OH DESERVA		4		TALDER		44:		OI TOUR		4
CLABAS	·		· /					TOTAL CLAUMS		118 0554	TIARY			
PTO - 1366 (REV. 1104) U.S. DEPARTMENT of COMMERCE Faloni and Tradimark Office														